	NTOF DEFICIENCIES	E & MEDICAID SERVICES (X1) PROVIDER/SUPPLIER/CLIA	(X2) MULTIPLE CONSTRUCTION		FORM APPRO OMB NO. 0938-	
имо медр	OF CORRECTION	IDENTIFICATION NUMBER:	A. BUILDING 01 - MAIN BUILDING 01		(X3) DATE SURVE COMPLETED	
VAME OF PROVIDER OR SUPPLIER		B. WING		00/04/004		
			" 	STREET ADDRESS, CITY, STATE, ZIP CODE	06/01/201	
LIFE C	ARE CENTER OF MOR	RRISTOWN		501 WEST ECONOMY ROAD		
(X4) ID	\$1UMARY OF	APPLIE		MORRISTOWN, TN 37814		
PREFIX TAG	(EACH DEFICIENC	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		FROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD SE CROSS-REFERENCED TO THE APPROPRIATE	COMPL DAT	
				Corrective Action:		
K 130	NFPA 101 LIFE SAFETY CODE STANDARD Required automatic sprinkler systems are continuously maintained in reliable operating condition and are inspected and tested periodically. 19.7.6, 4.6.12, NFPA 13, NFPA 25, 9.7.5		K 062	Education was provided to all maintenance	6/15	
				personnel on NFPA Life Safety Code	ĺ	
				Standard 19.7.6, 4.6.12, NFPA 13, NFPA 25,		
				9.7.5 on 6/15/15 by the Executive Director.	. [
				Affected sprinkler heads will be replaced		
				with appropriate heads by Morristown	ĺ	
		ĺ		Automatic Sprinkler Co. by 7/6/15		
				Residents with the Potential to be Affected:	.	
	This STANDARD is not met as evidenced by: Based on observation, the facility failed to			All residents and staff have the potential to	0	
				be affected.		
	I maintain the autom:	atic sprinkler system and its		Systematic Changes:	5 (03	
	components.		i	Sprinkler heads will be inspected after any	6/03/	
	The findings include:			painting or remodeling to ensure heads are	1	
				free of paint, loading or in any other		
	Observation on 6/1/15 between 11:00 AM and 2:00 PM revealed the following locations have paint over spray on sprinkler heads: 1. Front lobby. 2. Front lobby corridors leading to the East and West Wing. 3. Dining room in the back corner by dietary. 4. Corridor by room 301			disrepair by the maintenance department.	ł	
				Inspection and cleaning will also be		
				conducted monthly to ensure heads are in	n	
				good repair and will function properly by		
				the maintenance department beginning		
				6/3/15 and ongoing with no end date.		
	 Corridor by roon Corridor by roon 	n 301.		Monitoring:		
	6. Corridor by room	n 218		A performance improvement plan was	6/15/	
		j.		initiated on 6/15/15 to address the citations		
	These findings were	hese findings were verified by the maintenance		for Life Safety tag K 062 relating to several		
	lirector and acknowledged by the administrator luring the exit conference on 6/1/15. IFPA 25 2-2.1.1*		Į.	locations were found to have paint over		
				spray on sprinkler heads. Inspection and		
	NFPA 101 MISCELL	101 MISCELLANEOUS		cleaning will be performed monthly by the	!	
		Į.	K 130	maintenance department beginning	}	
	OTHER LSC DEFIC	ENCY NOT ON 2786		6/15/15 and will have no end date. During		
				the monthly inspection all sprinkler heads		
		ł		will be maintained by the monthly	1	
	This CTANDARD			monitoring and cleaning to include		
	THIS STANDARD IS	not met as evidenced by:		inspection for paint, corrosion, loading, or	†	
lu s	rei V Vledli	CALL EXPLO	URE (any other condition of disrepair.	(X6) DATE	
motency.	statement ending with an	managed at the same of		on may be excused from correcting providing It is deternursing homes, the findings stated above are disclosates, the above findings and place of providing It.	<u>ر</u>	

FORM CMS-2567(02-99) Previous Versions Obsolete Event ID: 3PBT21

Ø 0013/0016 PRINTED: 06/03/2015 FORM APPROVED

CENTERS FOR MEDICARE & MEDICAID SERVICES OMB NO. 0938-0391 STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION AND PLAN OF CORRECTION (X3) DATE SURVEY DENTIFICATION NUMBER: COMPLETED A. BUILDING 01 - MAIN BUILDING 01 445314 B. WING 06/01/2015 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 501 WEST ECONOMY ROAD LIFE CARE CENTER OF MORRISTOWN MORRISTOWN, TN 37814 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION Ю PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL (X5) COMPLETION PREFIX (EACH CORRECTIVE ACTION SHOULD BE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE TAG DATE DEFICIENCY) Corrective Action: 6/15/15 K 130 Continued From page 1 K 130 Education was provided to all maintenance Based on observation, testing, and interview the personnel NFPA 101 Miscellaneous and facility failed to have exits readily accessible and specifically NFPA 101- 7.2.1.6.1 Delayed working correctly. Egress Locks and NFPA 72 3-9.7 Door The findings include: Unlocking Devices and 3-9.7.1 on 6/15/15 by the Executive Director. Observation and testing on 6/1/15 at 2:10 PM 1.) Fire alarm company will repair faults revealed delayed egress locks at exits by rooms 301, 201, laundry, 101, and 115 did not release causing the magnetic locks to stay when the fire alarm was tested. The facility has energized during the test of the fire alarm 10 delayed egress locks on exits 2 of these locks system. This will be completed by the fire released with the fire alarm, 2 were not activated alarm company Commercial Building due to the locks were on a timer, and 1 lock was not tested. Systems by 6/22/15. Observation and testing on 6/1/15 at 1:50 PM 2.) Delayed egress hardware was replaced revealed the delayed egress door by room 101 by the Maintenance Director on 6-8-15. did not operate when tested. The door can be 3.) The panels that controls the doors will unlocked by using the keypad. Staff can readily open the door by entering the code if needed. be sent in to the manufacturer for firmware 3. Observation, testing, and interview with the updates to meet the requirements for maintenance director on 6/1/15 at 2:30 PM delayed egress doors by 7/15/15. revealed 10 of 10 delayed egress doors do not have an irreversible process once the delayed Residents with the Potential to be Affected: egress feature has been activated. All residents and staff have the potential to 10 of 10 delayed egress doors can be be affected. relocked/re-energized after the delayed egress feature has been activated by entering the code on the keypad. Once the code is entered during Systematic Changes: 6/15/15 the delayed feature it automatically cancels the 1.) Fire alarm company will test operation 15 second delayed featured release. of delayed egress doors quarterly in conjunction with the monthly tests NFPA 101 7.2.1.6.1 Delayed-Egress Locks. conducted by the Maintenance Director Approved, listed, delayed-egress locks shall be beginning 6/15/15 with no end date. permitted to be installed on doors serving low and 2.) Egress hardware was replaced by the ordinary hazard contents in buildings protected Director of Maintenance on 6/8/15 on older throughout by an approved, supervised automatic models to be more reliable. fire detection system in accordance with Section 9.6, or an approved, supervised automatic 3.) Following the firmware update, the panels will be programmed properly for "No

FORM CMS-2557(02-99) Previous Versions Obsolete

Event ID: 3PBT21

code/Irreversible delayed egress" by

7/15/15

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

2 0014/0016 PRINTED: 08/03/2015 FORM APPROVED

CENTERS FOR MEDICARE & MEDICAID SERVICES OMB NO. 0938-0391 STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING 01 - MAIN BUILDING 01 445314 B. WING 06/01/2015 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE **601 WEST ECONOMY ROAD** LIFE CARE CENTER OF MORRISTOWN MORRISTOWN, TN 37814 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION 1D (XS) PRÉFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) K 130 | Continued From page 2 Monitoring: K 130 6/4/15 1.) A performance improvement plan was sprinkler system in accordance with Section 9.7, and where permitted in Chapters 12 through 42, initiated on 6/4/15 to address the citations provided that the following criteria are met. for Life Safety tag K 130 relating to (a) The doors shall unlock upon actuation of an magnetic door locks at multiple locations approved, supervised automatic sprinkler system in accordance with Section 9.7 or upon the that did not release when the fire alarm actuation of any heat detector or activation of not was tested. The fire alarm company will more than two smoke detectors of an approved, monitor the proper functioning of the fire supervised automatic fire detection system in alarm panel quarterly with a start date of accordance with Section 9.6. 6/22/15 and will continue with no end date. (b) The doors shall unlock upon loss of power controlling the lock or locking mechanism. The facility maintenance department will (c) An irreversible process shall release the lock monitor the proper functioning of the fire within 15 seconds upon application of a force to alarm panel monthly beginning 6/15/15 and the release device required in 7.2.1,5.4 that shall will continue with no end date. not be required to exceed 15 lbf (67 N) nor be 2.) A performance improvement plan was required to be continuously applied for more than 3 seconds. The initiation of the release process initiated on 6/4/15 to address the citations shall activate an audible signal in the vicinity of for Life Safety tag K 130 relating to an the door. Once the door lock has been released egress door that did not operate when by the application of force to the releasing device, tested. The delayed egress hardware will be relocking shall be by manual means only. Exception: Where approved by the authority monitored daily to ensure proper having jurisdiction, a delay not exceeding 30 functioning of all delayed egress doors with seconds shall be permitted. a start date of 6/8/15 and will continue (d) * On the door adjacent to the release device, daily for one month with an end date of there shall be a readily visible, durable sign in 7/8/15 and then will be checked weekly letters not less than 1 in. (2,5 cm) high and not less than 1/8 in. (0.3 cm) in stroke width on a beginning 7/8/15 with no end date. contrasting background that reads as follows: 3.) A performance improvement plan was PUSH UNTIL ALARM SOUNDS initiated on 6/4/15 to address the citations DOOR CAN BE OPENED IN 15 SECONDS for Life Safety tag K 130 relating egress doors do not have irreversible process once NFPA 72 the delayed egress feature has been 3-9.7 Door Unlocking Devices. activated. The egress doors will be 3-9,7,1 monitored daily for one month with a start Any device or system intended to actuate the

locking or unlocking of exits shall be connected to

date of 6/5/15 and a end date of 7/5/15.

The egress doors will then be monitored

weekly beginning 7/5/15 with no end date.

06/16/2015 12:50PM FAX 4235871056 图 0015/0016 PRINTED: 06/03/2015 LCC MORRISTOWN BUS OFFIC DEPARTMENT OF HEALTH AND HUMAN SERVICES FORM APPROVED CENTERS FOR MEDICARE & MEDICAID SERVICES OMB NO. 0938-0391 STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: A. BUILDING 01 - MAIN BUILDING 01 COMPLETED 445314 B. WING 06/01/2015 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 501 WEST ECONOMY ROAD LIFE CARE CENTER OF MORRISTOWN MORRISTOWN, TN 37814 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION ΙD (X5) COMPLETION DATE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) TAG TAG DEFICIENCY) K 130 Continued From page 3 K 130 the fire alarm system serving the protected premises. 3-9.7.2 All exits connected in accordance with 3-9.7.1 shall unlock upon receipt of any fire alarm signal by means of the fire alarm system serving the protected premises. Exception: Where otherwise required or permitted by the authority having jurisdiction or other codes.